D 047001									
Rev. 06/2006	_			EPO	RT FORM			of P	age(s) EONLY
State of Idah	lo T	o Be Filed	By:			0.0			
Ben Ysursa Secretary of S		L-2	LOBBYIS (Sec. 67-6	619)		08 JAN 2 SECRETAR STATE C	9 PM Y UF	112: 55	
	<b>✓</b> A	nnual		Js	emi-Annu	al The C	F 10,	AHO	
(Type or print clea See instructions a	t bottom of page								
Lobbyist's name and permanent business address  Matthew Johnson 11303 North 118th Street Scottsdale, Arizona 85259			1	January 23, 2008			Period covered  year ending  (Mo.) (Day) (Yr.)  12 31 2007		
Item Totals of all reportal	ole expenditures made o	r incurred b	by Lobbyist	or by	Lobbyist's Empl	oyer on behalf	of Lobby	yist's Emplo	yer.
Category of Expenditure Reimbursed Personal Living and Travel	*Total Amount for All Employers	Proportionate amount Item 3, at bottom of		nts contributed by each employer (Identify f page.)			y employers, under		
Expenses Pertaining to Lobbying Activity  Do Not Have to be Reported	All Employers	Emplo	yer No. 1	Е	Employer No. 2	Employer N	o. 3	Employer	No. 4
Entertainment Food and Refreshment	\$129.46	s	129.46	<b>  s</b> _		s		\$	
Living Accommodations	0.00		0.00						
Advertising	0.00		0.00	_					
Travel	0.00		0.00	_					
Telephone	0.00		0.00	_					
Other Expenses or Services	0.00		0.00	_			}		
Total	s129.46	s	129.46	\$_		\$		s	
*When the number of employers you									on Page 1
The totals of each expend Date	iture of more than fifty d	ollars (\$50	) for a legisla Amoun			iblic office, and slators, Public an			in Group
N/A									
Continued on attached page(s)									
INSTRUCTIONS					Item Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code				Takeda Pharmaceuticals  No. 1 One Takeda Parkway  Deerfield, Illinois 60015					
Filing deadline: Annual repo Executive Lo	rt is due on January 31s obbist semi-annual repor		31st.	2					

No. 3

No. 4

TO BE FILED WITH:

Ben Ysursa Secretary of State PO Box 83720 Boise, 1D 83720-0080

Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4					or for or on behalf of any Legislat		ey or other tangible or intangible lic or Executive Official.				
	Da	ate Amount	Nar	ne of Legislator, Public or Executive Official Receiving or Benefiting							
Item 5	or Hot		ation, the number of the Senate er legislative activity in which		LEGISLATIVE SUB						
Subject		Bill, Resolution or Other		Code   01	Subject Agriculture, horticulture,	Code 17	Subject Health service, medicine, drugs				
(from N/A	(able)		and Section Number	02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state	18 19 20 21 22 collution, d and 23 24 25 ting, 26 4, 5, funds 29	and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)				
				_	TERTIFICATION: I hereby certify the orrect statement in accordance with S		67-6624 Idaho Code.				
Item 6	cont	ntify any rule, ratemaking tract bid or bid process, fi I lobbyist was supporting o	nancial services agreement or		obbyist signature Steven Kermisch: Klunke	to	Date 1/24/08				
N/A				E	mployer No. 1 signature		Date				
				E	mployer No. 2 signature		Date				
				E	mployer No. 3 signature		Date				

Employer No. 4 signature

Date